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**DR. J. SOLIS COHEN.**  
1431 Walnut St.  
PHILADELPHIA.

# PRESIDENTIAL ADDRESS

DELIVERED BEFORE THE

PHILADELPHIA COUNTY MEDICAL SOCIETY

JANUARY 18, 1888.

BY

J. SOLIS-COHEN, M.D.

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## ANNUAL ADDRESS OF THE PRESIDENT OF THE SOCIETY.

By J. SOLIS-COHEN, M.D.

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GENTLEMEN : In complying with that clause of our By-Laws which demands from the President of the Society an address at the close of his official term, let me, in the first place, express to you individually and collectively my cordial appreciation of the uniform courtesy of which I have been the grateful recipient alike in the chair and out of it.

The position of presiding officer of one of the largest, most reputable, intelligent, and influential medical societies of the United States is a position to be proud of; and one, the occupancy of which, even for a single term, must furnish a continuous source of gratification for the remainder of one's life.

Our active membership now numbers 504, with several propositions awaiting endorsement. During the past official year we have acquired thirty-one new members and have lost twenty-six, four by resignation, eleven by removal from the city and by failure to comply with the requirements of our By-Laws, and eleven by death; among the latter Dr. Nathan D. Hatfield, President when I signed the Constitution of the Society, in 1865, and Dr. William Terry Taylor, my colleague as Vice-President in 1877.

The record of those lost by death is as follows :

| Date.           | Name.                                | Graduate of  | Date of membership. |
|-----------------|--------------------------------------|--|---------------------|
| Jan. 4, 1887,   | Nathan Hatfield,                     | Jefferson Medical College, 1865,                   | Jan. 1868.          |
| Feb. 16, 1887,  | R. M. McClellan.                     | Jefferson Medical College, 1879,                   | June, 1881.         |
| Feb. 17, 1887,  | Wm. S. Little,                       | Bellevue Hospital Medical College,<br>N. Y., 1873, | Oct. 1880.          |
| March 2, 1887,  | Wm. Terry Taylor, <sup>1</sup>       | University of Pennsylvania, 1848,                  | Oct. 1870.          |
| March 13, 1887, | Austin Flint, of N.Y.<br>(Honorary.) | Harvard Medical School, 1883,                      | Oct. 1883.          |
| May 9, 1887,    | Elliot Richardson,                   | University of Pennsylvania, 1867,                  | Jan. 1881.          |
| May 13, 1887,   | Wm. Harkins Fox,                     | Jefferson Medical College, 1882,                   | Oct. 1885.          |
| May 25, 1887,   | Edgar P. Jefferis.                   | University of Pennsylvania, 1878,                  | April, 1882.        |
| July 14, 1887,  | David Davidson,                      | University of Pennsylvania, 1871,                  | Oct. 1878.          |
| Aug. 21, 1887,  | N. Archer Randolph,                  | University of Pennsylvania, 1882,                  | April, 1886.        |
| Aug. 30, 1887,  | Nathan L. Hatfield, <sup>2</sup>     | Jefferson Medical College, 1826,                   | Jan. 1850.          |
| Nov. 29, 1887,  | Henry D. Harvey,                     | University of Pennsylvania, 1878,                  | June, 1880.         |

Memorial notices have been promised of several of these deceased members ; and when they have been prepared, a special meeting will be called for the express purpose of listening to them ; a plan which will avoid interruption or curtailment in the routine of our regular meetings for scientific or for business purposes. Of the original fifty-seven founders of the Society in 1849 but three remain : the venerable Dr. William Ashmead,<sup>3</sup> of Germantown ; Dr. Alfred Stillé ; and Dr. Richard J. Levis, my immediate predecessor in the chair. Of the one hundred and forty-eight members at the time of my own admission in 1865, so many familiar faces have faded in death that an effort is sometimes required to feel assured that this is the same old County Medical Society which for so long played such a prominent part in directing the medical policy of the state and of the nation. Not only has the Society altered much in personal features, but it has altered much in the matters and manners of its scientific work. Then a young man rarely participated in debate and rarely presented a paper based on original research or on personal observation. Oftener would he report a case of interest or of rarity, with or without statistical references as might be ; or open a subject largely with quotations from the authors of text-books and of monographs. The discussions then, as now,

<sup>1</sup> Vice-President in 1877.

<sup>2</sup> President in 1865.

<sup>3</sup> Dr. Ashmead died Feb. 2d, aged eighty seven years.

formed an essential feature of the proceedings at conversational meetings, and sometimes there were opposing champions of theories present, ready to pit themselves against each other whenever the subject discussed led to choice between pet speculations on irritation, on secretion, on elimination, or on what not.

Therapeutics had barely begun to free itself from the pharmaceutic loads long before impressed upon medical practice in the United States by the example of a large class of British practitioners whose legal status seemed to compel too much prescription in order to secure adequate pecuniary remuneration for professional services; and too much stress was often laid upon the special value of special prescriptions advocated by various observers under various conditions. The medicine of that day was still largely theoretic, conjectural and empirical.

The graduate of a few years' standing was rarely prepared to advance theories, to support or to combat them; he had not become skilful in conjecturing causes to account for varying phases in the course of maladies; while practice was still so hard to secure, that he who had no hospital or dispensary appointment had little opportunity to acquire knowledge by empiricism, or even by accident. Hence the comparative reticence of the modest young physician at our conversational meetings of more than twenty years ago.

When, however, the gradual admission into our schools of methods of instruction more and more practical in their relations to the study of disease and to the comprehension of its treatment, led to educating the mind of the student rather than to exercising his memory, substantial results justified the continuance and enlargement of the plan; and now the average recent graduate, when he comes in contact with disease on his own account, understands better what is before him than did the average recent graduate of only a quarter of a century ago. Some of the time then actually lost, if not wasted, in hearing or conning masses of verbiage now discarded and largely relegated to historical treatises for consultation as desired, is usefully employed in personal work in the physical, physiological, histological, pathological,



chemical, or therapeutical laboratory ; so that the student gains some practical notions of the objects upon which he is to work and of the materials with which his work is to be performed. In the classroom, the stethoscope, ophthalmoscope, otoscope, laryngoscope, and similar instruments of precision in observation, have been utilized to teach him to see and to hear for himself rather than to depend exclusively upon the opinions of his teacher and on those published in his textbooks. The microscope, the thermometer, the exploring needle, the chemical test and other appliances for control in observation, have taught him how to avoid mistakes often inseparable from too great a reliance upon mere gross appearances ; while they supply him with accurate methods for detecting pathologic departures from health at the earliest available opportunity. He is more carefully instructed in the details of operative interference, and is taught to avoid that carelessness of person and of appliance which recent experience has shown to have been the most prolific source of failure in the immediate results of many important surgical operations. These practical studies, and others of like character, including the studies of dietetics, of sepsis, and of infection, have led to changes in professional opinions that in some instances have amounted to complete reversals ; and even the well known but illy comprehended beneficent effects of certain methods of treatment with drugs, with diet, with electricity, with heat and with exercise, have proven to be based upon principles and properties far different from those which were formerly ascribed to these agencies.

Thus the young physician's means of diagnosis are no longer limited to hearsay and to empiric observation. His cognizance of facts in medical science, and of the natural laws governing the inception of diseases and their progress, enables him to approach patients with an air of confidence derived from actual knowledge of the principles of medicine, rather than with that air of assumption of familiarity with disease which was its frequent substitute when the secrets of departures from physiological states of health were more enveloped in clouds of theoretical speculations.

Hence, in meetings of medical societies, when theories are advanced which, despite their prevalence and their authorities, are clearly at variance with recently discovered facts, the young man who knows better is tempted to rise and explain; and if his remarks are delivered with becoming deference, and the information tendered bears the stamp of certitude, his advent into medical debate is received by his seniors with a quiet appreciation which not only encourages him to present some subject himself ere long, in the light of modern revelations, but insures him an intelligent and sympathetic audience.

Better prepared than were their predecessors, recent graduates are not so long in becoming known as prominent physicians; and practice is acquired by them far more rapidly than used to be the fashion.

Our young men, too, are being called upon more and more frequently by their seniors to help clear up some obscure features in cases which may require familiarity in the use of modern appliances of precision, or of control, and thus they steadily gain a legitimate professional good repute which has a very beneficial influence on their career; and that, without any undue effort on their part to force themselves upon the attention of the profession, or upon that of the public. This is largely the class of men whose utterances have become more and more familiar in our society during the period referred to, and to whose ranks additions are accruing from time to time, to replace the thinning files of older men—those who keep abreast with modern research, and those to whom much study has become a burden—as they withdraw from active participation in our meetings, or become too tired to attend when not brought out by some subject in which they feel exceptional interest.

Advances in treatment closely follow advances in diagnosis, in the natural philosophy of disease, and in prognosis. These advances and changes are duly recorded in the papers brought before us, and in the discussions they elicit. Here, too, theory has largely fallen back before fact, until by the course of natural selection, mere speculation is now well nigh banished from our deliberations. Hence the practical character of our scientific work, which is gradually and steadily increasing in importance, as may be seen by reference to our published transac-

tions; of which it may be safely said that they do not compare unfavorably with similar publications of sister societies, and that those of the year just closed show no deterioration in character of subjects or in methods of comment.

Honor where honor is due. Much of this societary success of later years is attributable to the admirable plan adopted under the presidency of Dr. Welch, whose interest in the society has not subsided since the election of his successors. By this plan, members were personally requested to take part in the discussion of subjects upon which they were known to be well informed, and were furnished in advance, whenever practicable, with abstracts of the line of argument which would characterize the papers to be discussed.

During the last year two very valuable scientific discussions were due severally to the interest taken for the purpose by the Chairman of the Committee on Obstetrics and Gynecology, and on Clinical Pathology, respectively, and to whom it is proper to make this thankful reference. The success on the evenings referred to, in attendance, and in interest in the subjects presented, should induce the Directors to take similar measures to secure three or four equally valuable meetings every year.

It is to be deplored, on the score of professional ethics, that mention of some of our scientific work is occasionally noted unofficially in the public newspapers, despite the express interdiction in our By-laws. Whether this prohibitory clause be deemed judicious or not, it is plainly the duty of all members to accede to its behests. Those who disapprove of it should present their reasons for so doing in full meeting and should endeavor to have it rescinded. They have neither the right to ignore it on the one hand, nor the right to disobey it on the other. On several occasions when reporters of the daily press have been present at our meetings they have assured me that they were present on invitation of a member; that they had no desire to intrude, and had believed that their presence would be agreeable to the Society. This subject leads me to offer a few remarks upon certain relations of the profession to the public. While there is no reason to



doubt that much of the individual editorial advertisement of subjects discussed or to be discussed at societies, or of operations performed or to be performed in public places or in private, is due to officiousness on the part of a student, a follower, an attendant, or a patient; there is equally good reason to believe that most of it is courted, directly or indirectly, by the individual most interested. Of this fact I have been amply assured by newspaper men who have been my own patients, and to whom I have put the question direct. I have been assured, further, that it could be taken for granted that little matter of personal medical importance ever gains access to the papers without the knowledge of those most intimately concerned. On the other hand, it is equally true that matters of some immediate momentary interest to the public do not always reach the newspapers, even when passing through the mails in hundreds of notices openly printed upon postal cards.

While it is gratifying to believe that this itch after newspaper notice may be much less prevalent in Philadelphia than in some other localities, the hope is to be indulged that it may eventually become entirely extinguished. The disease at present is in great measure a mere matter of taste—quite poor taste, according to the ethics of the Philadelphia County Medical Society.

One custom in which the ordinary conduct of the physicians of Philadelphia is to be commended, in their relations to the public, consists in their unwillingness to cater to gratifications of the morbid appetite of the newspaper public for tattle as to the nature of the diseases with which some of their distinguished patients may be afflicted, and as to the prospects of their death or survival. Propriety indicates that such inquiries should be referred to the patient if he be in a responsible condition; or, if otherwise, to that member of the family upon whom the responsibility has devolved. The confidential relations of a patient to his physician should remain undisturbed even when the patient is no longer competent to withdraw his confidence, and no communications presumptively disagreeable to him in his senses, should be furnished for press gossip without the consent of those who

are most immediately interested. The pleasure derived by an invalid from the daily perusal of his favorite newspaper is often exceedingly great; far greater than when, under the press of affairs, he read chiefly headings and telegraphic items. He reads it much more thoroughly, sometimes even to the advertisements. As he reads day by day, of what is going on in the great world outside, his little world of bedroom life seems somewhat less constricted. Let us avoid curtailing his gratification by acts of ours. If his newspaper cannot be taken up without a dread of seeing some paragraph discussing the nature of his malady and the prospects of his early demise, this innocent source of enjoyment is poisoned for him. He must rest content with a mutilated paper, the very gaps in which are repulsively suggestive, or he must consent to have it read to him, or give it up altogether and thus become deprived of taking interest in many things outside of his own illness. It is hard enough for him to fear or to know that his malady is incurable, without having the fact forced upon his attention at some comparatively happy moment when it is out of his thoughts. Harder still, perhaps, to steel himself into indifference.

It is unnecessary to mention examples. They must be familiar enough. In some instances there has been abundant reason to believe that death has been hastened by thoughtless comments in newspapers. Shall the individual always be sacrificed to the multitude? It has been stated that occasionally, when potentates or very wealthy individuals have been the subjects of these items, special copies of newspapers have been printed for their use, in which the objectionable personal passages of the general edition have been replaced with other matter. But there is little hope that the sores of the afflicted shall not be exposed to public gaze, unless their own physicians protect them by the charity of their reticence. The public maw is so rapacious, that the average newspaper man dares not deprive it of any tidbit, however unfit the food, and, worse than the cannibal who sometimes kills the sick man that his people may devour him, the editor sometimes delivers the sick man to his readers that they may devour him even while he is dying.

Our relations to each other remain in a very satisfactory condition, as evinced by the harmoniousness of thought and of action in the routine business of the Society and in such special business as is presented from time to time.

The additions to our membership, while large, are hardly commensurate with the number of physicians in the city. Increase should be encouraged not only by seeking the accession of those who are in high repute as to their realization of their obligations to each other and to their profession, but by intimation to those whose very association with us we feel would be all they would require to learn those unwritten duties and to live up to them, that any desire on their part to join our numbers would be met with the respectful consideration of our Board of Censors.

In concluding, it but voices the sentiment of the Society at large to bespeak for the coming year continued interest in matters of medical science and medical polity, so that the Philadelphia County Medical Society may be universally regarded as one of the best models for furthering the promotion of medical knowledge and the spread of medical ethics.

